

News from the West

Newsletter of the Australian Health Promotion Association (WA Branch)

September 2012



NEWS FROM THE WEST EDITORIAL TEAM

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FROM THE EDITORIAL TEAM

There's a spring in our step as we bring you this edition of *News from the West* in what have been a few big months for health promotion. We have witnessed a stunning public health victory with the Federal Government announcement of the new tobacco plain packaging laws, as well as the emergence of ground-breaking West Australian initiatives.

The LiveLighter campaign launched in June has created quite the stir in obesity prevention. For the first time, you may have seen confronting images of 'grabbable guts' and fatty insides take over your MasterChef and Olympic Games viewing pleasure. This application of social media, designed to rouse people's awareness of their waistlines and the potential impact on their health, has divided many health professionals. Questions have been posed such as 'Is this sending the right message to the right people to change their behaviour?' or 'Could this encourage negative behaviours from the already weight conscious?' As with the implementation of any health promotion program there may be unintended outcomes, positive or negative. We must remember that as health practitioners we, in the first instance, seek to do no harm and act for the greater good. The expanding issues of healthy weight and obesity demand ongoing discussion between health professionals and the community though not at the expense of action. Margaret Miller shares a great insight into some of the heavy issues weighing on this campaign (page 06).

We've seen new ground broken to report dubious alcohol advertising with the formation of the Alcohol Advertising Review Board (AARB). For many of us it doesn't seem right that regulation of alcohol advertising falls under the jurisdiction of the alcohol companies themselves. Step in, McCusker Centre for Action on Alcohol and Youth and Cancer Council WA. With the support of other health agencies they have provided the community with a clear avenue to report alcohol advertising deemed to breach advertising codes. Read the piece from Hannah Pierce and Julia Stafford (page 08) to find out more about the AARB, offenders reported to date and results of their first report. They are working towards better regulation of alcohol advertising and the AHPA (WA Branch) is excited to see this initiative grow.

Without a doubt the voice of health promotion is growing stronger and louder. In this issue watch out for the new 'Health Promotion in the News' section (page 15), where we've handpicked topical media pieces that are generating some interesting discussion.

The Professional Development subcommittee have been busy bringing you events such as the new 'Health promotion mums group', 'Yellow-li-cious sundowner', 'Winning presentation skills' workshop and the annual 'Student careers showcase'. Linking in with our partner agencies benefits our members by connecting you with some thought-provoking seminars, including the '*Obesity Policy Coalition*' and '*The changing media world and implications for public health*'.

The 2011 health promotion symposium 'LEAP' has now been evaluated and you should have received the report in your inbox (contact us for a copy if you haven't). The ideas and action areas identified in the report will continue to shape health promotion in WA. We encourage you to take some time to have a read and identify actions that you or your organisation can undertake.

Before signing off we'd like to welcome Courtney Mickan into the *News from the West* editorial team, filling the shoes of Jamie Cavill who continues in the Secretarial role for the WA Branch. A big thank you to Jonathan Hallett for his handy publication skills that allow us to continue to bring you this fresh, new-look newsletter. The team at AHPA (WA Branch) would also like to congratulate Michelle Ng on the safe arrival of her baby girl Rebekah.

We hope you enjoy this issue.

Courtney, Amber + Lisa



WA BRANCH UPDATE

Gemma Crawford
President, AHPA (WA Branch)

We have had a busy first half of the year. AHPA (WA Branch) has been ramping up advocacy efforts with a range of submissions at a state and national level (including to the National Food Plan, ANPHA Research Strategy, WA Health Promotion Framework, National Alcohol Floor Price).

The second half for the year will see important discussion about the professionalisation of health promotion along with planning for the next iteration of the AHPA (WA Branch) Operational Plan (in line with the development of the National Strategic Plan from 2013). The AHPA (WA Branch) will also present several more networking and professional development events (page 23). The discussion on professionalisation will provide a timely opportunity to review the role and value of our discipline alongside other allied health professions.

In other news, the branch is undertaking a review of our scholarships program and developing a journal article and presentation in anticipation of 20 years of the program and partnership with Healthway next year. The 2013 AHPA (WA Branch) Healthway Graduate Scholarships Program is now calling for applications. We look forward to agencies partnering with new graduates to develop innovative programs based on solid health promotion principles and evidence.

Whilst attending some of this year's networking events, it has been heartening to note the number of new and early career practitioners banding together to socialise, talk shop and introduce some non-members to the Association. What has been less visible are the senior practitioners at some of these events. This reduced presence is of course for a myriad of reasons, however in speaking to many of the new and mid-career practitioners in meetings and events, a theme has emerged around the desire to engage with more senior staff in informal settings. So, we are putting out the call to our doyens of health promotion as we work toward developing an intensive mid-career professional development program for 2013 to find some time to share your wisdom.

This will become increasingly important as we call for solidarity in our response to alarming moves in a number of states to slash and burn the preventive health workforce and evidence based strategies. Whilst Queensland is the most notable (with announcements of sweeping staffing reforms –some counts indicate up to 2700 job cuts in the form of redundancies to operational staff including health promotion and public health practitioners), community health promotion cuts in Victoria, changes

in the Northern Territory and rumblings elsewhere could also see a watered down approach to health promotion.

These are stressful and frightening times for prevention and for our Queensland colleagues.

AHPA has not been silent on these issues. An open letter to Queensland members has been circulated outlining the changes and the response of the preventive health workforce.

The letter notes that across the state approximately 180 positions within the health promotion and public health nutrition field have been made redundant. This comes further to jobs already lost when the government chose to defund a number of non-government organisations that were also providing community based health promotion services.

AHPA (QLD Branch) has been building an alliance with the Public Health Association of Australia, Australian Medical Association (QLD) and the Royal Australasian College of Physicians (AFPHM). Since forming that alliance, media releases have been issued, door stop media conferences held, radio and television interviews conducted and a social media campaign launched.

Once of the very challenging components of this advocacy is that many of the AHPA (QLD Branch) committee members themselves work for QLD Health. According to the Public Sector Codes of Conduct and Management Acts, public servants are unable to be involved in advocacy activities that involve speaking out against the government. In addition to this, recent legislation prohibits any organisation who is funded equal to or greater than 50% by the government to speak out too.

We will soon ask you to contribute to the debate on these issues through a range of advocacy responses which AHPA will be developing. If you have colleagues in QLD please consider contacting them to offer your support or your skills. We urge you to continue to follow these stories as they unfold and seek opportunities to make your voice heard.

In the midst of these challenges, more than 1000 health professionals came together to debate and discuss challenging issues for population health in a changing world demographics, translational research, global health, social determinants, wicked problems and more... all issues that cannot be addressed without a strong, trained and vocal population health workforce. The 2012 Population Health Congress saw spirited discussion on social determinants, Indigenous health, the impact of taxation and the trans-pacific trade agreement.

It may be news to many that though we have had a win in the Australian High Court regarding plain packaging for tobacco, that is not the end of the story. Deb Gleeson and Professor David Legge spoke of potential challenges to come for non-communicable diseases based on the potential outcomes of the negotiations of the Trans-Pacific Partnership Agreement (TPPA).

In 2011, the Australian Government committed to ensuring its ability to regulate and legislate important areas of public policy such as tobacco and to reject provisions to limit its powers such as those in relation to plain packaging. What is concerning is that depending on the outcomes of the negotiations, the TPPA may be able to restrict Australian policy making. Wins such as plain packaging could be challenged under international trade and investment agreements. For example, whilst Philip Morris has been unsuccessful in the Australian High Court, the company has also pursued other avenues such as international arbitration because of treaties and agreements that Australia is part of. Such agreements also have the potential to impact on Australia's ability to regulate big alcohol and fast food.

For more information visit <http://aftinet.org.au/cms/> or view Deb's article in the MJA: <https://www.mja.com.au/journal/2012/196/5/challenges-australia-s-national-health-policy-trade-and-investment-agreements>.

WA had strong representation at the Congress with a range of poster and oral presentations. The AHPA (WA Branch) awarded a branch scholarship to cover the cost of registration to one of our members. Additionally, all three of our AHPA (WA Branch) Healthway Scholarship recipients attended the Congress, with two of the recipients receiving Healthway Capacity Building grants to attend. One of the WA delegates, Dr Emma Croager (with colleagues Johnson and Slevin) was the recipient of best paper for the Congress, receiving the inaugural Konrad Jamrozik award for a paper titled "Unproven breast imaging and the law".

Justine Leavy (along with colleagues Heyworth, Middleton, Rosenberg and Woloszyn) was the winner of the Ray James Award for best paper in the Health Promotion Journal of Australia. This award is provided in memory of Ray who was one of the co-founders of the Journal and is given to a paper that demonstrates innovation, contributes to knowledge and is measured on its quality of methods, effectiveness and transferability. In case you hadn't seen it previously, the abstract for the paper "Tap into Good teeth - a Western Australian pilot study of children's drinking patterns" can be found on page (11).

We look forward to sharing with you a selection of the WA presentations in our Congress wrap up to be held later in the year. So, until next time, I will leave you with some wise words from T.S Elliot. "If you aren't in over your head, how do you know how tall you are?"

Gemma Crawford
President, AHPA (WA Branch)

(Thanks to the Qld branch for information cited in this article.)

NEW ADDITIONS TO THE 2012 EXECUTIVE COMMITTEE



Introducing Katie Mooney
Currently employed at: Cancer Council WA • **Current position:** Make Smoking History Project Officer • **Years working in Health Promotion:** 21 months • **Academic qualifications:** Master of Public Health (Primary Health Care), Bachelor of Nursing • **Kids and/or pets:** Charlie the Siamese fighting fish • **Generation:** Y • **What are you most looking forward to this year?** My honeymoon to SE Asia in July • **Favourite WA holiday destination:** Bunker Bay



Introducing Bree Shields
Currently employed at: Curtin University • **Current position:** Lecturer (Health Promotion) • **Years working in Health Promotion:** 5 years • **Academic qualifications:** Master in Public Health, Graduate Certificate in Diabetes Education & Bachelor of Health Science (Nutrition) • **Kids and/or pets:** 1 dog (Sara) • **Generation:** Generation Y • **What are you most looking forward to this year?** Summer • **Favourite WA holiday destination:** Dunsborough



LEFT: Read about the Healthy Communities Initiative in the City of Wanneroo on page 12.

OBESITY PREVENTION WASN'T MEANT TO BE EASY

Margaret Miller, APD, AN
Senior Research Manager, Child Health Promotion Research Centre
School of Exercise and Health Sciences, Edith Cowan University

The recently launched Live Lighter campaign¹ targeting obesity highlights many of the ethical and professional dilemmas facing health promotion practitioners tackling sensitive issues.

Developed jointly by the National Heart Foundation and Cancer Council with funding from the Department of Health, the campaign targets adults and aims to address the high rates of obesity in the community and the associated burden of chronic disease.

The campaign encourages adults to lead healthier lifestyles with attention to what they eat and drink and to become more active. As well as encouraging individual action, the campaign also plans to advocate for changes in the community that will support individual action: reduced advertising of unhealthy foods, increased access to healthy foods, better food labelling, policies and environments that support physical activity. Interventions in the first phase include television and media advertising, web based information to assist behaviour change and engagement of health professionals and community in advocacy for policy and environmental change.

All text book health promotion, but the campaign has attracted a petition signed by over 650 health professionals and community members to withdraw the advertising campaign, spirited debate in the dietetics profession and provocative media coverage. What are the issues and what can we learn from them?

The most contentious aspect of the campaign is the 'grabbable' gut and 'toxic fat' images². The campaign developers have deliberately borrowed this graphic approach from effective anti-tobacco campaigns to highlight the health effects of excess weight. Whilst denying scare tactics, the intent is to jolt the complacency of those in the overweight social norm (60% of adults are overweight or obese and campaigns such as the Draw the Line and Swap It Don't Stop It have shown only modest response). A hard hitting campaign also has potential to raise public debate about the obesity issue

which has become an old news story. Ongoing public profile is needed to mobilise advocacy for supportive policy and environmental changes.

Objections to the campaign relate to the potential to do harm³. There is substantial evidence that anti-obesity messages can increase the stigma associated with being overweight and can exacerbate rather than reduce unhealthy eating⁴. Messages that focus on appearance and personal responsibility have the potential to increase the culture of blame and obesity-related bias evident in the community and amongst health professionals. Obesity and eating disorders are not mutually exclusive and targeting fat bellies does not address the issue which is far more complex than tobacco cessation. Whilst the campaign clearly targets overweight adults, there is potential for unintended effects on other groups such as adolescent girls.

There are ethical issues on both sides⁵: we cannot ignore the public health impact of obesity yet rates are increasing in the face of sustained physical activity and healthy eating campaigns. Adaption of strategies shown to be effective in other fields such as tobacco control and road safety is advocated internationally, although obesity prevention is more complex⁶. Hard hitting media campaigns are the thin edge of the wedge that also includes community lifestyle education and policies to create conducive advertising, fiscal and physical environments, influence individual awareness and choices and change social norms⁷.

Yet disordered eating is also increasing and the negative psychological and weight consequences (including obesity) of poor body image are well documented⁴. Collaboration between eating disorder and obesity fields has identified preventive strategies that may be of mutual benefit⁸. Nevertheless, a 2011 Australian government sponsored symposium on development of collaborative obesity prevention campaigns does not appear to have included representatives of the eating disorders field⁷. Whilst consultation occurred in development of the WA campaign, and many below the line strategies meet guidelines for mutual benefit, disordered eating professionals were not satisfied with the media advertising⁹.

The debate about the media campaign has been hampered by lack of published evidence of the specific benefits of such a hard hitting campaign in the obesity prevention context. Evaluation of the Live Lighter campaign will help to expand the evidence base. Aside from the traditional formative, process and impact evaluation, Professor Adrian Bauman speaking at the Australian forum recommended new areas of mediator analysis in such campaigns that determine how campaigns exert their effects. In addition, sustained evaluation should be undertaken to tease out effective components⁷. However, despite the sensitivities, no mention was made of assessing the potential to do harm.

Consultation with the disordered eating field in the development of the campaign was a good start that should be extended to its evaluation. Aside from evaluation of stated campaign objectives, some important questions to ask are about the cut-through and effects on young people, the responses of adults with disordered eating and the potential for harm. This a ground breaking campaign and the formative, process and impact results should be subject to peer review and disseminated widely for the benefit of all stakeholders.

References available upon request

A NEW APPROACH TO ACTION ON ALCOHOL ADVERTISING

Hannah Pierce, Information and Research Officer
Julia Stafford, Executive Officer

McCusker Centre for Action on Alcohol and Youth

What was the last alcohol advertisement you saw?

Was it on a bus shelter or billboard? In this morning's newspaper? On T.V as you cheered on your footy team on the weekend? As you checked Facebook, YouTube or did your footy tipping online? On the radio? At the cinema? In a magazine? Chances are it wasn't long ago...

There are few places untouched by alcohol advertising, and no magic screens that make it invisible to young people. There is no method to prevent an ad that is designed to appeal to 18 year olds from appealing to those under 18.

Exposure to alcohol promotion contributes to young people's attitudes to drinking, drinking initiation and drinking at harmful levels. Research consistently shows strong associations between exposure to alcohol advertising and young people's early initiation to alcohol use and/or increased alcohol consumption.

This should be of considerable concern in the context of evidence of harmful drinking patterns among young people and growing community concern about the range of harms associated with alcohol including alcohol-related violence and the impact of alcohol on the developing brain. All the while alcohol is being promoted in ever more creative ways, supported by budgets that those of us working in health promotion could only dream about. Given that global alcohol company Diageo (whose portfolio includes Smirnoff Vodka, Johnnie Walker and Bundaberg Rum) had a global

marketing budget of US\$1.5billion in the second half of 2011 alone, it's mind boggling to think what the annual marketing spend by all alcohol companies would total.

Alcohol advertising in Australia, as in many countries, is self-regulated by the alcohol and advertising industries. The same companies that spend millions of dollars on advertising to maximise sales of their products are in charge of regulating their own advertising. Not only does this sound ridiculous, the industry's self-regulation has proved time and time again to be ineffective in preventing young people's exposure to alcohol advertising, with many limitations: participation is voluntary, there are no penalties for breaching the voluntary codes; it doesn't cover sponsorship of sport, gifts with purchase or product placement; it covers only the content of advertisements, not the placement; code provisions are weak or allow a narrow interpretation; and the system is only just starting to recognise social media as a marketing tool (despite most major alcohol brands having official Facebook pages).

There is a need for independent, legislated controls on all forms of alcohol promotion, in line with the recommendation of the National Preventative Health Taskforce to "phase out alcohol promotions from times and placements which have high exposure to young people aged up to 25 years".

The Alcohol Advertising Review Board (AARB) is one component of the much-needed advocacy push towards strong, independent regulation of alcohol advertising. Established by the McCusker Centre for Action on Alcohol and Youth and Cancer Council WA, with support from health groups across Australia, the AARB is a world first initiative which has already made a big impact.

The AARB provides an alcohol advertising review service, independent of the alcohol and advertising industries. The AARB reviews complaints on the basis of the AARB Code, which sets criteria for acceptable alcohol advertising in Australia and covers the content and placement of all forms of alcohol advertising. The AARB Content Code is constructed using only provisions from existing self-regulated alcohol advertising codes from around the world, including Australia, New Zealand, the UK and Canada – we are essentially reviewing alcohol advertisements against the industry's own accepted codes. As there are no codes that effectively cover advertising placement, the AARB Placement Code is a set of ideal provisions that we consider would reasonably protect young people from exposure to alcohol advertising.



The complaints process is easy for the community to engage with, and complaints are reviewed by panel members from a pool of over 70 professionals with expertise in a range of fields, including public health, research, medicine, law, education and marketing.

In the first three months of operation, the AARB received 63 complaints, 44 of which were considered appropriate for review by the AARB Panel. Of these, 25 were upheld, and 17 upheld in part.

Advertisements judged as contravening the Code related to:

- Alcoholic products with names such as "Pom Pom", "Hot Pink", and "Skinnygirl Cocktails";
- Jim Beam on Campus, a promotion targeting university students.
- Sport sponsorship - Carlton Draught (AFL), Jim Beam and Jack Daniel's (V8 Supercars), VB (Surfing Australia), and the NSW v QLD State of Origin (A.K.A the VB versus XXXX State of Origin).
- Outdoor alcohol ads placed near schools.

The first report of the AARB, along with all 44 determination reports, was released on 2 August 2012. Both the launch and the release of the first report received substantial media coverage and got the attention of the alcohol and advertising industries! The AARB has no legal power to enforce its decisions, but it can communicate determinations to the media and the public, highlighting the need for stronger alcohol advertising regulation in Australia. Encouragingly, some alcohol advertisers have chosen to participate in AARB processes, including one alcohol company that took immediate action to remove an outdoor ad close to a children's playground.

Submitting a complaint to the AARB is simple – just send a photo or link to the advertisement (if you can) and briefly describe why you believe it is inappropriate. At www.alcoholadreview.com.au you will find an online form for complaints, determination reports, the first report, media coverage, further background to the AARB and contact details.

The AARB aims to support the community to voice its concern about alcohol advertising. We encourage AHPA members to contact the AARB if you see alcohol advertising you believe is inappropriate and spread the word among your colleagues and networks.

References available upon request

WINNER OF RAY JAMES AWARD FOR HPJA BEST PAPER

“Tap into Good Teeth – a Western Australian pilot study of children’s drinking patterns”

Justine E. Leavy, Jane Heyworth, Aves Middleton, Michael Rosenberg and Magdalene Woloszyn [Health Promotion Journal of Australia, Vol 23, No 1, April 2012]

Abstract

Issue addressed: The increase trend in the prevalence of dental caries in Australian children is a concern to public health professionals. Attitudes, behaviours and lifestyle patterns established in childhood are often carried throughout adult life. The objective of the study was to estimate the proportion of Perth metropolitan year two public primary school children drinking tap water at home, school and play. It also aimed to explore knowledge and attitudes that children and parents have towards drinking tap water, bottled water, fruit juices and soft drinks.

Methods: Nine Western Australian government primary schools were recruited. A facilitator-led questionnaire was administered to year two primary school students and a matched parent self-administered questionnaire was also completed.

Results: Forty-two per cent of the children in our study reported if thirsty they drank tap (fluoridated) water at home whereas parents stated 60% of children drank tap water at home. The type of drink appeared to vary with time of day/activity while overall water was most frequently drunk; a higher proportion of milk was drunk at breakfast, whereas soft drinks were drunk in a greater proportion while watching television.

Conclusion: This study found the vast majority of year two children in metropolitan Perth public primary schools are drinking tap water.

So what? Further research into the contribution of carbonated soft drinks and sports drinks to the increased dental caries rate in young children is warranted.

HEALTHY COMMUNITIES IN THE CITY OF WANNEROO

Toyah Tinworth

Healthy Communities Coordinator, City of Wanneroo

In 2009, the City of Wanneroo was selected as the first local government area (LGA) in Western Australia (WA) to receive funding from the Australian Government Department of Health and Ageing to implement their Healthy Communities Initiative (HCI). This initiative was designed to improve health and wellbeing outcomes of community members currently not in full-time employment and address the significant prevalence of chronic disease associated with overweight and obesity.

The City of Wanneroo (CoW) is one of the largest and fastest growing LGAs in the state with ischaemic heart disease, cancer of the lung, bronchus or trachea and cerebrovascular disease the leading causes of death in 2005-2007. The rates of diabetes in women are higher than the state average (7.4% in CoW compared to 6.6% in WA). The CoW has a very diverse population and has several suburbs that experience significant socio-economic disadvantage.

With the HCI funding, CoW branded the ‘Get A Life’ program. The initiative has been a great success through implementation of programs outlined in the grant application and the development of several additional programs to address the needs of the community.

Key outcomes include:

- Full capacity of the 10-week ‘Get a Healthy Life’ program, with a 92% attendance rate with a group of motivated participants ranging from young mothers to retired seniors.
- The implementation of a Mini Pit Stop, completed by 92 residents at four community events to raise the City’s health and wellbeing profile.
- The creation of ‘The Villages’. Recognising the need for continual support, the team encouraged participants who completed the term-based classes to form independent exercise groups. Currently 50 community members are registered.

The City’s Healthy Communities team is currently advocating for the development of healthy public policies in local government. Additionally advocacy is being conducted regarding the long term benefits of health promotion professionals being employed within local government to enable continuation of work in the health and wellbeing arena once grant funding ceases in June 2013.

For more information about the initiative, please contact Toyah Tinworth, Healthy Communities Coordinator on (08) 9405 5426 or via Toyah.Tinworth@wanneroo.wa.gov.au

References available upon request

SCHOLARSHIPS NOW OPEN

Applications are now open for the 2013 Graduate Health Promotion Scholarships.

If you would like to take control of your future in health promotion and develop a unique project with an agency of your choice, these scholarships may be for you.

You will receive a 6-month full-time salary, additional support for professional development as well as an experienced health promotion mentor.

And that doesn't include the benefits you will get from being able to work on a project that you have developed and implemented yourself.

For more info on eligibility criteria check out: <http://healthpromotionscholarshipswa.org.au/> or email Jonathan Hallett at scholarshipswa@healthpromotion.org.au



ABORIGINAL DIABETES PREVENTION STORYBOOK FOR CHILDREN

Ebony Nardi

2012 AHPA (WA Branch) Healthway Graduate Scholarship recipient, Diabetes WA

Type 2 diabetes is a serious health issue for Aboriginal communities and develops at much younger ages than in non-Aboriginal Australians. Aboriginal people also have much higher rates of diabetes related complications occurring at earlier stages in life. To create awareness of the issue and to work towards reducing this risk Diabetes WA, through an Australian Health Promotion Association (WA Branch) Healthway Graduate Scholarship, is developing a culturally appropriate storybook for Aboriginal children. The storybook will promote three key prevention messages: eat healthy, choose water, and keep fit.

To ensure the cultural appropriateness of the book's messages and storyline, Aboriginal children, families and health professionals have been involved at all stages of the project. Storytelling sessions were conducted with children from eight Western Desert communities, which assisted with storyline and character development. Further testing of the draft storybook was also undertaken with Aboriginal families in partnership with Derbarl Yerrigan Health Service in Perth. The Aboriginal community is also involved in the artwork, illustration and printing elements of the project through partnerships formed with Bandyup Women's Prison and True Blue Galleries.

The storybook is in its final stages, with illustrations and editing being finalised. The completed storybook will be utilised by Diabetes WA's Aboriginal health programs and will be available to Aboriginal communities and organisations across the state.

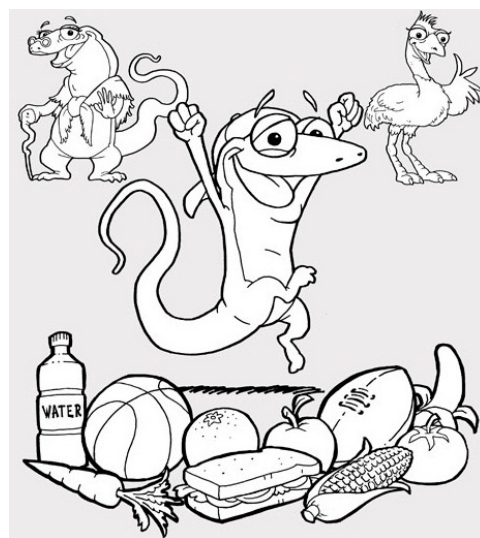
If you would like more information about the project or would like to receive a copy of the completed storybook please contact Ebony Nardi at ebony.nardi@diabeteswa.com.au or (08)9436 6246.



LEFT: Asha Singh from Diabetes WA reading the draft storybook to kids at the Western Desert Football Carnival in Nullagine.

BELOW: A work in progress, Gary Goanna storybook cover.

[Story on right]



HEALTH PROMOTION IN THE NEWS

Over recent months we've seen health promotion feature in the media. In this new section of News from the West, the AHPA committee has handpicked several articles which evoked some great round-the-table discussion amongst us. Did you see these articles? Do you agree or disagree with their point of view? We encourage you to share your thoughts and comments, or to suggest articles for the next addition, via email adminwa@healthpromotion.org.au

Olympics sponsorship: supporting sport or funding fat?

Mike Daube, 21 July 2012, The Conversation

What does the Olympics stand for: is it the inspiration for a healthier, sportier community? Or is it just another way to sell junk food and booze to an ever-fatter, ever-drunker population of couch potatoes?

Read more at: <http://theconversation.edu.au/olympics-sponsorship-supporting-sport-or-funding-fat-8054>

Social media pages are 'ads'

Julian Lee, 6 August 2012, The Age

A ruling that Facebook is an advertising medium - and not just a way to communicate - will force companies to vet comments posted by the public to ensure they are not sexist, racist or factually inaccurate.

Read more at: <http://www.theage.com.au/digital-life/digital-life-news/social-media-pages-are-ads-20120805-23nz4.html>

Bad medicine: health promotion

Des Spence, 17 April 2012, BMJ

Research is flawed and open to the bias of the authors because people don't invest time and energy to prove themselves wrong. So if research conclusions don't make intuitive sense, it is prudent to question the validity of the research. So it is with the conclusions of research into health promotion, because I don't believe that educating (that is, lecturing) patients to change lifestyle works.

Read more at: <http://www.bmj.com/content/344/bmj.e2755>

MULLEWA RESIDENTS BECOME 'SWAPPERS'

Liz Bradshaw

Regional Health Promotion Officer, Mullewa Health Service, WACHS-Midwest

Residents in the small country town of Mullewa have had the opportunity to participate in the Healthy Active Mullewa Program courtesy of a small grant made available through the Swap It, Don't Stop It campaign.

Since February, a range of physical activities including Zumba, water aerobics, hydrofit, learn to dance lessons, badminton and meditation has been on offer. Community market days and healthy cooking sessions with the Mullewa Indigenous Women's Group and Mullewa Men's Shed have also been coordinated.

A key success of the Healthy Active Mullewa Program has been an increased awareness about the healthier choices that can help protect people from chronic disease. The Swap It Don't Stop It mascot, Eric, visited Mullewa and greeted people all over town during a walk. Over 30 participants committed to making a swap that would improve their current physical activity levels or eating habits, these included, "swap hot chips for a salad roll, fried eggs for scrambled eggs and iced coffee for orange juice". Evaluation showed that many residents recognised Eric and the "Swap It Don't Stop It" message that he represented. They recognised that, "it means cut things down instead of stopping them all together" and "swap unhealthy choices for healthy ones". Residents also reported taking action in response to this message, - "I don't drink kola beer anymore since you showed me how much sugar was in it" and "I have started walking, but not everyday yet".

Another key outcome was the identification of activities that people enjoyed, and determining skill gaps and training needs. One lady said "I have been waiting 15 years for water aerobics in Mullewa! It is so hot here in the summer, being in the pool is great". Information collected indicated that as a result of attending the Healthy Active Mullewa Program, 60% of participants intended to participate in sports at a recreation centre in the future. Since the program has finished, social badminton and the weekly exercise group have an average of 10 and 6 people attending respectively. In addition, walking leaders are being recruited to organise local walking groups during wildflower season, and expressions of interest are being sought to qualify community members as water aerobics instructors and lead classes next summer.

The Swap It Don't Stop It campaign is funded by the Australian Government through the National Partnership Agreement on Preventive Health. For more information, contact Liz Bradshaw on 08 9961 6205 or Elisabeth.Bradshaw@health.wa.gov.au



Eric during his visit to Mullewa. [Story on previous page]



Stephanie Alexander showing RAWA Community School children how to prepare a healthy meal using safe knife skills. [Story on right]

SUPPORTING BETTER ACCESS TO FRUIT + VEGETABLES IN PUNMU

Stephanie McFaull + Rex Milligan
Foodbank WA

During June, Foodbank WA, in partnership with the Stephanie Alexander School Kitchen Garden Foundation (SASKGF), visited Punmu to establish a new fruit and vegetable garden.

Punmu is a remote community located 650 km east of Port Hedland, within the East Pilbara region. The community of 197 residents has a clinic, store, a café/kitchen and a school.

The RAWA Community School in Punmu has 28 students. Through our Regional Strategy, Punmu School has been able to access the Foodbank WA School Breakfast Program plus Food Sensations® nutrition support.

Students from lower primary through to secondary school participated in four healthy cooking sessions over two days. The sessions were delivered outside using a wooden table as a preparation area, with barbecues and a newly established wood fire pizza oven for cooking.

A previously established school garden was resurrected by the SASKGF staff, RAWA school staff, local service providers and Foodbank WA staff. The local tip provided many of the structural resources for the garden and the woodwork room at the school built sign posts indicating produce locations.

The establishment of the school garden is an important step to RAWA Community School becoming self reliant in the provision of fruit and vegetables to its children and the Punmu community.

With Foodbank WA nutritionists showing how easy it is to make healthy, tasty meals, it is hoped the garden product will become a major source of food for the Punmu community.

Puntukurnu Aboriginal Medical Service and Pilbara Population Health also supported this important initiative.

For more information, contact Stephanie McFaull on 08 9463 3209 or at stephanie.mcfaul@foodbankwa.org.au.

ROYAL FLYING DOCTOR SERVICE UPDATE

Jemma Snow + Tricia Slee

Royal Flying Doctor Service on the Road Primary Health Care Program

Craig Lowndes + Jamie Whincup launch a RFDS Pit Stop

V8 Supercar drivers Craig Lowndes and Jamie Whincup were in Perth in May 2012 and helped launch the Royal Flying Doctor Service (RFDS) Pit Stop for men's health at Canning Vale Markets.

The RFDS health promotion and medical staff decided to run the Pit Stop to engage workers at the markets to take control of their health and create awareness of men's health issues.

As part of the healthy heart Pit Stop, the RFDS health team conducted a range of free healthy lifestyle tests for men including chassis (waist measurement), oil pressure (blood pressure), exhaust (smoking), shock absorber (stress) and torsion (flexibility) checks for the 126 people who put their bodies 'over the pits'.

Anecdotally, we know that men are more likely to take their car in for a service than visit their GP. Men will often delay seeing a doctor when they suspect a problem, but will rush their car to the mechanic as soon as they hear a strange noise. This event highlighted the need for men to stay healthy by making healthier lifestyle choices and keeping themselves in good working order through regular GP check-ups.

The Pit Stop initiative aims to help remove some of the stigma associated with men 'admitting a problem' and to promote the importance of regular health checks. Feedback from the men who went through the pits on the day was positive, and the RFDS is committed to continuing to engage with and provide an effective health promotion program for men in WA.



The RFDS 'health mechanics' with one of the cars which helped engage men.

Royal Flying Doctor Service gets on the road

A unique initiative for the usually airborne Royal Flying Doctor Service, the RFDS on the Road Program provides free health education, disease screening and practical first aid training to people living in remote locations isolated from the health services most of us take for granted.

The RFDS on the Road regional teams travel by 4WD through some of Australia's most isolated and unforgiving country to visit remotely located residents in WA. The teams visit satellite mine and exploration sites, pastoral stations, tourist facilities, remote community schools, roadhouses and Aboriginal communities and provide them with RFDS medical chest and first aid training, healthy lifestyle education and private airstrip checks. Staff members also conduct health education and training activities at schools, hospitals, volunteer emergency service groups and at regional community events.

In addition to remote visits, the RFDS on the Road Program facilitates free community skin cancer screening to people throughout the Pilbara, Goldfields and Kimberley regions in partnership with the Lions Cancer Institute. Our statistics indicate that approximately 25 per cent of all people screened have been found to have a suspicious skin lesion requiring medical follow-up.

The Program has been running in the Pilbara and Goldfields for a number of years with support from BHP Billiton Iron Ore and BHP Billiton Nickel West. In 2011, Woodside Energy came on board to support the expansion of the Program into the Kimberley region. Since its inception in 2004, the Program has provided health promotion services to more than 33,500 regional and remote residents in WA.

For more information about RFDS on the Road, contact Trish Slee on 9417 6391.



One of the RFDS on the Road 4WDs travelling in the remote WA outback near Marble Bar.

HEART FOUNDATION UPDATE

Lisa Wheatley

Senior Project Officer, Heart Foundation

The Swap It, Don't Stop It campaign aims to promote small, everyday changes that people can make toward a healthier lifestyle - without losing out on all the things they love!

The Heart Foundation has recently developed a range of new resources which include:

- **Food label reader wallet card** – a pocket-sized guide to reading food labels. The card provides tips on fat, sugar and salt content per 100g plus some per serve tips.
- **Simple swap posters** – five posters showing food swaps and the fat or sugar reduction.
- **Event resources** – including template posters, media release and participant certificates.
- **Physical activity and nutrition resource links** – a list of reliable physical activity and nutrition tools and websites.

Free merchandise (e.g. water bottles, hats, balloons, hats, cook books, lip balm) is also available for community events.

Please visit the Swap It WA website (www.swapitwa.com.au/resources.html) to preview/order resources and merchandise. For further information, please contact Lisa Wheatley at the Heart Foundation on (08) 9382 5908 or via email Lisa.wheatley@heartfoundation.org.au



LiveLighter

LiveLighter is a new public health program taking Western Australians on a confronting journey inside their own bodies to highlight the consequences of unhealthy choices.

By now, you may have come across our hard-hitting mass media campaign – including TV, newspaper, magazine, cinema, radio and online advertisements. Visit the LiveLighter website at www.livelighter.com.au to learn more about toxic fat, and then use our interactive tools to assess your health risk.

A range of resources and merchandise are now available for health professionals, and those organising community events.

Warning signs

In 2009, a comprehensive and ongoing Warning Signs of Heart Attack campaign was launched (currently funded to December 2012) to help Australians identify, know and respond to the warning signs of heart attack and to address structural changes that influence patient delay.

In developing, implementing and evaluating the Will you recognise your heart attack? campaign, the Heart Foundation has engaged with health professionals in primary care, hospitals, emergency response, government and the community.

Innovative social marketing has included television, radio and digital strategies plus an interactive website. A suite of consumer resources have been developed including new resources for remote Australians, with a focus on Aboriginal and Torres Strait Islander people.

To find out more about the campaign visit our website www.heartattackfacts.com.au. If you can help us spread our messages, please contact the Warning Signs team on 9388 3343. To order resources, call 1300 36 27 87.

UPCOMING AHPA EVENTS

Look out for email updates and event invites from AHPA (WA Branch). Dates are still to be confirmed for some events. For queries: please contact adminwa@healthpromotion.org.au

Breakfast Networking Event

Thursday, 25 October 2012

Bringing Population Health Congress Home Seminar (+ PHAA)

Tuesday, 30 October 2012

Health Promotion Mums' Group

Wednesday, 21 November 2012

Professionalisation of Health Promotion Webinar Event

November 2012

Health Promotion Christmas Function

Tuesday, 4 December 2012

WHAT'S ON IN HEALTH?

October:

- BreastScreen WA's Breast Cancer Awareness Month – BreastScreen WA (1-31 Oct)
- Girls Night In – Cancer Council WA (1-31 Oct)
- Walk Over October – Heart Foundation WA (1-31 Oct)
- Carers Week 2012 – Carers WA (14-20 Oct)
- Pink Ribbon Day – Cancer Council WA (22 Oct)
- National Kidsafe Day – Kidsafe (23 Oct)

November:

- National Skin Cancer Awareness Week – Cancer Council WA (18-24 Nov)
- Postnatal Depression Awareness Week – BeyondBlue (18-24 Nov)

Visit www.whatson.health.wa.gov.au for more dates

CONFERENCE DATES OF INTEREST

15–17 Oct 2012

The International Union against Sexually Transmitted Infections (IUSTI)

Melbourne, VIC

www.iusti2012.com/

31 Oct–3 Nov 2012

Be Active 2012

Sydney, NSW

<http://sma.org.au/be-active/>

8–10 Nov 2012

National Primary Health Care Conference 2012

Adelaide, SA

<http://agpnforum.com.au/>

12–14 Nov 2012

Thriving Neighbourhoods 2012

Melbourne, VIC

www.thrivingneighbourhoods.org/

20–21 Nov 2012

First National Sexual and Reproductive Health Conference 2012

Melbourne, VIC

www.shfpa.org.au/component/content/article/79-shfpaphaconf2012

25–29 Aug 2013

21st IUHPE World Conference on Health Promotion 2013

Pattaya, Thailand

www.iuhpeconference.net

MEMBERSHIP BENEFITS

Are you a member? What does membership entitle you to?

Membership to the WA Branch of the Association can serve you and your profession in a number of ways including access to:

- Professional development workshops and seminars at a reduced fee including reduced registration to the Annual National Conference
- National conference scholarship opportunities
- News From the West, our WA Branch newsletter, produced three times a year
- An exclusive mentoring program
- A listserver for members which provides postings of current employment opportunities, news of events and developments in the field and networking news
- Health Promotion Scholarships
- Social and networking events with other practitioners in the field

At a national level you also receive member access to the website, copies of the Health Promotion Association of Australia journal published three times per year (a peer reviewed journal of health promotion practice and research evaluation, facilitating communication between researchers, practitioners, and policy-makers) and the quarterly Australian Health Promotion Update newsletter.

Your continuing support as a member is very valuable to us. Please help the WA Branch to grow by introducing a new member today! Individual memberships support the state Branch to provide ongoing high quality services for members. It provides you with an opportunity to participate in health promotion direction in WA. If you or your colleagues are interested in joining the Association or you would like more information about membership, please visit the AHPA website (<http://www.healthpromotion.org.au/>).

Find out more about individual memberships or corporate subscriptions by visiting <http://www.healthpromotion.org.au/membership>.

Are your details correct?

- Do you receive emails via the listserve?
- Are you receiving your official copy of the Health Promotion Journal of Australia and the quarterly Australian Health Promotion Update newsletter?
- If not, log in to the member section of the AHPA website.

Article submission alert!

News from the West is sent out to more than 200 members three times a year. The AHPA WA Branch is seeking articles from its members which share achievement, successes, new programs, research and new resources in the field of Health Promotion.

If you have something you want to write about, article submission templates can be obtained by contacting us at adminwa@healthpromotion.org.au

Please ensure that your article adheres to the AHPA WA Branch Article Submission Guidelines for greater chance of getting published. The editors reserve the right to omit, edit or condense any submitted article.

Note: Articles appearing in *News from the West* do not necessarily reflect the views of the Australian Health Promotion Association (WA Branch or National).



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